

## **PEDIATRIC TRAUMA CARE**

The catchment area for a pediatric trauma facility is usually larger than that of an adult facility. As such, effective long-distance transportation and communication networks are necessary. It is critical that pediatric trauma care be integrated within the overall EMS system in a given community, state, or region.

Optimal care of the injured child should be reflected by patient outcome data. The quality management program should provide for a complete review of each death or disabled child, including the prehospital and hospital phases of treatment. This program also should review child safety and prevention programs, which are frequently coordinated with community or governmental activities.

### **HOSPITAL RESOURCES FOR CARE OF THE INJURED CHILD**

Commitment on the part of the institution and its physicians is the single most important element for any hospital seeking designation as a Pediatric Trauma Regional Resource Facility. The process to designate a Pediatric Trauma Regional Resource Facility should be accomplished by an appropriately constituted agency following an impartial, external review and assessment.

The highest level of pediatric trauma care is provided in a Pediatric Trauma Regional Resource Facility. This facility will be capable of providing comprehensive care for all injured children, particularly the most severely injured in a given region. Generally, there will be only one such hospital in a region, but in certain geographic areas characterized by large and dense populations, more than one facility may be required.

The Pediatric Trauma Regional Resource Facility is generally located in either a children's hospital or a large general hospital with a pediatric surgical service and significant interest in and commitment to pediatric trauma care. To qualify as a Pediatric Trauma Regional Resource Facility, an institution must have the following elements:

1. An appropriately credentialed pediatric surgeon available at all times in charge of the pediatric trauma service
2. A designated, identifiable emergency department area specific for children, with appropriately trained staff and pediatric equipment
3. A separate pediatric floor or unit
4. Designated pediatric surgical and medical specialists available and on call
5. A separate pediatric ICU staffed by appropriately trained surgical and medical specialists, with appropriate equipment and other ancillary personnel
6. A psychosocial family support service
7. Special equipment necessary for resuscitation, surgery, and postoperative care



## **HOSPITAL**

Children's hospital or general hospital with a separate pediatric department

General hospital with an organized pediatric service

## **EMERGENCY DEPARTMENT**

Pediatric emergency department with appropriate personnel, equipment, and facilities

Designated pediatric area in an emergency department staffed with pediatric trauma personnel and appropriate equipment

## **ICU**

Pediatric ICU with pediatric surgery and other surgical, medical, and nursing personnel and equipment needed to care for the injured child

Pediatric ICU with appropriately trained personnel and equipment

## **TRAUMA SERVICE**

Pediatric trauma service organized and run by a pediatric surgeon

Pediatric trauma service administered by the pediatric surgeon and run by his/her designee

## **TRAUMA TEAM**

1. Pediatric Surgeon
2. Pediatric Orthopedics
3. Pediatric Neurosurgeon
4. Pediatric Anesthesiologist
5. Pediatric Intensivist
6. Pediatric Emergency Physicians
7. Pediatric Radiologists
8. Other Pediatric Surgical Specialists
9. Other Medical Pediatric Specialists
10. Pediatric Trauma Nurse Coordinator
11. Pediatric Trauma Nurse

1. Pediatric Surgeon
2. General Surgeon
3. Orthopedics
4. Neurosurgeon
5. Surgical Critical Care Specialist
6. Emergency Physicians
7. Radiologists
8. Pediatricians
9. Trauma Nurse Coordinator
10. Pediatric-trained Trauma Nurses

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**RESEARCH**

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**INJURY PREVENTION PROGRAM**

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**PEDIATRIC TRAUMA SERVICE**

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NOTES TO TABLE 1:

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